



North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities and Substance Abuse Services
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Michael Moseley, Director

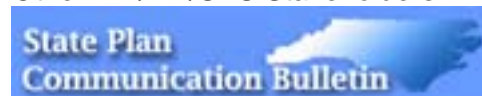
August 2, 2006

MEMORANDUM

To: Legislative Oversight Committee Members
Commission for MH/DD/SAS
Consumer/Family Advisory Committee Chairs
State Consumer Family Advisory Committee Chairs
Advocacy Organizations and Groups
North Carolina Association of County Commissioners
County Managers
County Board Chairs
North Carolina Council of Community Programs
State Facility Directors
Area Program Directors
Area Program Board Chairs
DHHS Division Directors
Provider Organizations
MH/DD/SAS Professional Organizations and Groups
MH/DD/SAS Stakeholder Organizations and Groups
Other MH/DD/SAS Stakeholders

From: Mike Moseley 

Re: **Communication Bulletin #059**
Session Law 2006-142 House Bill 2077



As most of you are probably already aware, both the State and local CFACs are now codified in statute. The new statute is entitled Mental Health Reform Changes (Session Law 2006-142, House Bill 2077). The portions of this statute dealing with CFACs are Part 4A 122C-170 (local CFACs) and Part 4A 122C-171 (State CFAC) and are attached to this communication. The fact that State and local CFACs are now in statute is good news and speaks to North Carolina's commitment to and regard for the perspective of Consumers and Family Members in the Mental Health, Developmental Disabilities and Substance Abuse Service (MH/DD/SAS) system.

Both the State and local CFACs have been in operation for some time and may have to make changes in order to accommodate the requirements outlined in the statute. The Division is currently working to implement the changes as they relate to the State CFAC.

The Division will provide assistance to the local CFACs as far as any changes they may need to make given the new statutory guidelines. I would suggest that local CFACs devote some time at their September meetings to identifying what changes need to be made to conform to the requirements of the statute. The Division liaison will be very happy to take part in review and discussion of the statute and how to proceed with implementing the changes necessary for the CFAC to be in conformance with the statute by November 1, 2006. Please review the following overview of key components of the language in Part 4A 122C-170 as it relates to local CFACs:

- ◆ Each CFAC shall adopt bylaws to govern the selection and appointment of its members, their terms of service, the number of members, and other procedural matters. The terms of member shall be three years, and no member may serve more than two consecutive terms.



- ◆ At the request of either the CFAC or the governing board of the area authority or county program, CFAC and the governing board shall execute an agreement that identifies the roles and responsibilities of each party, channels of communication between the parties, and a process for resolving disputes between the parties.
- ◆ Each of the disability groups shall be equally represented on the CFAC and the CFAC shall reflect as closely as possible the racial and ethnic composition of the catchment area. The CFAC shall be composed exclusively of:
 - Adult consumers of mental health, developmental disabilities and substance abuse services.
 - Family members of consumers of mental health, developmental disabilities and substance.

The CFAC shall undertake all of the following:

1. Review, comment on and monitor the implementation of the local business plan.
2. Identify service gaps and underserved populations.
3. Make recommendations regarding the service array and monitor the development of additional services.
4. Review and comment on the area authority or county program budget.
5. Participate in all quality improvement measures and performance indicators.
6. Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, developmental disabilities and substance abuse services.

Please contact the Consumer Empowerment Team member assigned to your LME for assistance: Jim Greer (828) 545-2523, Catherine Kocian (704) 575-0900, Felissa Ferrell (336) 312-0867, Michael Bramwell (919) 715-3197, Barbara Thomas (252) 947-1102 or Wes Rider (910) 520-9027.

Attachment: SL2006-142 HB 2077 Part 4A 122C-170 & 171

cc: Secretary Carmen Hooker Odom
Dr. Allen Dobson
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Dan Stewart
DMH/DD/SAS Executive Leadership Team
DMH/DD/SAS Staff
Lynette Tolson
Rich Slipsky
Wayne Williams
Kaye Holder
Yvonne Copeland
Coalition 2001 Chair
Kory Goldsmith
Andrea Russo
Jennifer Hoffman



Part 4A. Consumer and Family Advisory Committees.

"§ 122C-170. Local Consumer and Family Advisory Committees.

(a) Area authorities and county programs shall establish committees made up of consumers and family members to be known as Consumer and Family Advisory Committees (CFACS). A local CFAC shall be a self-governing and a self-directed organization that advises the area authority or county program in its catchment area on the planning and management of the local public mental health, developmental disabilities, and substance abuse services system.

Each CFAC shall adopt bylaws to govern the selection and appointment of its members, their terms of service, the number of members, and other procedural matters. At the request of either the CFAC or the governing board of the area authority or county program, the CFAC and the governing board shall execute an agreement that identifies the roles and responsibilities of each party, channels of communication between the parties, and a process for resolving disputes between the parties.

(b) Each of the disability groups shall be equally represented on the CFAC, and the CFAC shall reflect as closely as possible the racial and ethnic composition of the catchment area. The terms of members shall be three years, and no member may serve more than two consecutive terms. The CFAC shall be composed exclusively of:

(1) Adult consumers of mental health, developmental disabilities, and substance abuse services.

(2) Family members of consumers of mental health, developmental disabilities, and substance abuse services.

(c) The CFAC shall undertake all of the following:

(1) Review, comment on, and monitor the implementation of the local business plan.

(2) Identify service gaps and underserved populations.

(3) Make recommendations regarding the service array and monitor the development of additional services.

(4) Review and comment on the area authority or county program budget.

(5) Participate in all quality improvement measures and performance indicators.

(6) Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, developmental disabilities, and substance abuse services.

(d) The director of the area authority or county program shall provide sufficient staff to assist the CFAC in implementing its duties under subsection (c) of this section. The assistance shall include data for the identification of service gaps and underserved populations, training to review and comment on business plans and budgets, procedures to allow participation in quality monitoring, and technical advice on rules of procedure and applicable laws.

"§ 122C-171. State Consumer and Family Advisory Committee.

(a) There is established the State Consumer and Family Advisory Committee (State CFAC). The State CFAC shall be a self-governing and self-directed organization that advises the Department and the General Assembly on the planning and management of the State's public mental health, developmental disabilities, and substance abuse services system.

(b) The State CFAC shall be composed of 21 members. The members shall be composed exclusively of adult consumers of mental health, developmental disabilities, and substance abuse services; and family members of consumers of mental health, developmental disabilities, and substance abuse services. The terms of members shall be three years, and no member may serve more than two consecutive terms. Vacancies shall be filled by the appointing authority. The members shall be appointed as follows:

(1) Nine by the Secretary. The Secretary's appointments shall reflect each of the disability groups. The terms shall be staggered so that terms of three of the appointees expire each year.

(2) Three by the General Assembly upon the recommendations of the President Pro Tempore of the Senate, one each of whom shall come from the three State regions for institutional services (Eastern Region, Central Region, and Western Region). The terms of the appointees shall be staggered so that the term of one appointee expires every year.

(3) Three by the General Assembly upon the recommendations of the Speaker of the House of Representatives, one each of whom shall come from the three State regions for institutional services (Eastern Region, Central Region, and Western Region). The terms of the appointees shall be staggered so that the term of one appointee expires every year.

(4) Three by the Council of Community Programs, one each of whom shall come from the three State regions for institutional services (Eastern Region, Central Region, and Western Region). The terms of the appointees shall be staggered so that the term of one appointee expires every year.

(5) Three by the North Carolina Association of County Commissioners, one each of whom shall come from the three State regions for institutional services (Eastern Region, Central Region, and Western Region). The terms of the appointees shall be staggered so that the term of one appointee expires every year.

(c) The State CFAC shall undertake all of the following:

(1) Review, comment on, and monitor the implementation of the State Plan for Mental Health, Developmental Disabilities, and Substance Abuse Services.

(2) Identify service gaps and underserved populations.

(3) Make recommendations regarding the service array and monitor the development of additional services.

(4) Review and comment on the State budget for mental health, developmental disabilities, and substance abuse services.

(5) Participate in all quality improvement measures and performance indicators.

(6) Receive the findings and recommendations by local CFACs regarding ways to improve the delivery of mental health, developmental disabilities, and substance abuse services.

(7) Provide technical assistance to local CFACs in implementing their duties.

(d) The Secretary shall provide sufficient staff to assist the State CFAC in implementing its duties under subsection (c) of this section. The assistance shall include data for the identification of service gaps and underserved populations, training to review and comment on the State Plan and departmental budget, procedures to allow participation in quality monitoring, and technical advice on rules of procedure and applicable laws.

(e) State CFAC members shall receive the per diem and allowances prescribed by G.S. 138-5 for State boards and commissions."